

you can't address...a level playing field is what Senator Janssen talked about, we don't have a level playing field because of this ERISA exemption. Forty percent of health insurers out there are totally outside of state regulation, and whatever we say or do can't really touch their operations. So you are really adding to the regulation of one area of health insurance but not all, making it a nonlevel playing field. The pharmacy field is one where they are feeling a lot of competition. They are probably the first line of competition in the health care field because of the mail-order option. You aren't going to mail-order a visit to the doctor or physical therapist or whatever. You are going to have to see him in person, but you can order and get your pharmacy needs met through the mail, so they really have felt the competitive edge of health care reform first, and there are some consequences to it, but in my view, the 76 pharmacies that closed can't be directly attributed to this mail-order activity. Now the other consequence that you can anticipate, though, is a pretty marked increase in what people will have to pay for their mail-order prescriptions. Currently, as I understand it, for instance Mutual of Omaha has something like a \$5 copay, and it may go up to even \$24. I am not quite sure on those figures, but it is a significant increase in what the copays may have to go up for. Now that is not going to hurt the employers out there. It is going to hurt the people out there that are going to have to be paying now a copay where they didn't have to before. So you are not reducing health care costs. You are not reducing out-of-pocket expenses for individuals. We will be increasing health care costs and increasing out-of-pocket expenditures by people that need prescriptions, and the vast majority of these individuals, as I understand it, that are now getting mail-order are long-term care maintenance drugs, these are elderly people by and large, perhaps to...

SPEAKER WITHEM: One minute.

SENATOR WESELY: ...say to those individuals who have the need for prescriptions to maintain themselves on a long-term basis. So I am just guessing, I am speculating here, but I am going to guess they are probably older individuals and usually older people are on fixed incomes, and so this is not going to be well received, I think, by those individuals because it is not somebody else that will be paying it. It will be they, themselves, paying this increased copay to get their prescriptions filled. So there are a number of factors that